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Bib Data Sheet

CONFIRMATION NO. 4492

|                                    |   |                     |                               |                                |
|------------------------------------|---|---------------------|-------------------------------|--------------------------------|
| <b>SERIAL NUMBER</b><br>10/761,943 | <b>FILING OR 371(c)<br/>DATE</b><br>01/20/2004<br><b>RULE</b> | <b>CLASS</b><br>356 | <b>GROUP ART UNIT</b><br>2877 | <b>ATTORNEY DOCKET<br/>NO.</b> |
|------------------------------------|---|---------------------|-------------------------------|--------------------------------|

## APPLICANTS

Hong Peng, Fremont, CA;

## \*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/440,876 01/17/2003 and claims benefit of 60/480,824 06/23/2003

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*  
04/23/2004

\*\* SMALL ENTITY \*\*

|   |                                   |                                 |                               |                                    |
|---|-----------------------------------|---------------------------------|-------------------------------|------------------------------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no   | <b>STATE OR<br/>COUNTRY</b><br>CA | <b>SHEETS<br/>DRAWING</b><br>11 | <b>TOTAL<br/>CLAIMS</b><br>23 | <b>INDEPENDENT<br/>CLAIMS</b><br>3 |
| 35 USC 119 (a-d) conditions met<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance |                                   |                                 |                               |                                    |
| Verified and Acknowledged<br>Examiner's Signature _____ Initials _____  |                                   |                                 |                               |                                    |

## ADDRESS

HONG PENG  
42874 VIA NAVARRA  
FREMONT, CA94539

## TITLE

Method and apparatus for monitoring biological substance

|                                       |   |   |
|---------------------------------------|---|---|
| <b>FILING FEE<br/>RECEIVED</b><br>412 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
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